In re Application of:

Docket No. 00862.023315

YOSHIAKI KABURAGI

Examiner: Laura E. Martin

Application No.: 10/706,941

Group Art Unit: 2853

Filed: November 14, 2003

Confirmation No.: 7416

For: PRINTING APPARATUS AND

PRINTING CONTROL METHOD

November 16, 2006

## **Mail Stop Amendment**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment and Statement of Substance of Interview in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below.

| CLAIMS AS AMENDED                             |                                      |       |  |                         |                  |    |                 |
|---|--------------------------------------|-------|--|-------------------------|------------------|----|-----------------|
|   | (2) CLAIMS REMAINING AFTER AMENDMENT |       | (4)<br>HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | (5)<br>PRESENT<br>EXTRA | RATE             | AD | DITIONAL<br>FEE |
| TOTAL<br>CLAIMS                               | 8                                    | MINUS | 20   | 0                       | x \$25<br>\$50   | \$ | 0               |
| INDEP.<br>CLAIMS                              | 2                                    | MINUS | 4  | 0                       | x \$100<br>\$200 | \$ | 0               |
| Fee for Multiple Dependent claims \$180/\$360 |                                      |       |  |                         |                  | \$ | 0               |
|   |                                      |       | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT      |                         |                  | \$ | 0               |

|   | Verified Statement claiming small entity status is enclosed, if not filed previously.   |
|---|---|
|   | A check in the amount of \$ is enclosed.  |
|   | Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed  |
|   | Themonth extension of time fee and the additional claims fee are being paid electronically with this submission. The Commissioner is hereby authorized to charge any additional fees due, or to credit any overpayment, to Deposit Account No. 06-1205.   |
| X | Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. |
|   | A check in the amount of \$ to cover the fee for a month extension is enclosed.   |
|   | A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.  |
| X | Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.  |
|   | Respectfully submitted,   |
|   | Attorney for Applicant Douglas W. Pinsky Registration No. 46,994  |

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